

**CERTIFICATE OF MAILING**  
 I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at \_\_\_\_\_, on \_\_\_\_\_.

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_

<b>In re Application of Miller et al.</b>	
Application Number 10/541,044	Filed 01/01/2004
For <b>HYBRIDIZATION-BASED BIOSENSOR CONTAINING HAIRPIN PROBES AND USE THEREOF</b>	
Group Art Unit 1634	Examiner Sarac Bausch

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- |  |              |
|--|--------------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130) | \$ <u>65</u> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)          | \$ _____     |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)       | \$ _____     |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)        | \$ _____     |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)       | \$ _____     |
- ☒ Applicant claims small entity status.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 141138. I have enclosed a duplicate copy of this sheet.
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

_____ /Edwin V. Merkel/ Signature	_____ November 23, 2009 Date
_____ Edwin V. Merkel Typed or printed name	_____ (585) 263-1128 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 form is submitted.